

UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE
Application for Waiver of Self-Guided Cave Tour Fees
Carlsbad Caverns National Park

Please assemble and return the following information with this application to support your request. Lack of, or insufficiently prepared documentation, may result in denial of requested waiver. We need a minimum of 15 working days after receiving your application to review your request and make a determination.

1. Date of proposed visit: _____ Estimated time of arrival: _____ Estimated time of departure: _____
2. Educational institution sponsoring this tour or field trip:

Name: _____ Telephone Number: _____

Address: _____
3. ATTACH THE FOLLOWING DOCUMENTATION to this application:
 - A. Official documentation of this group's recognition as an educational institution by a Federal, State or local government body. (A copy of **EDUCATIONAL TAX EXEMPTION CERTIFICATE** is preferred.) A statement from an officially recognized educational institution which sponsors or provides credits as part of your organization's educational endeavors will also satisfy this requirement.
 - B. A **statement on SCHOOL LETTERHEAD as to the specific purpose of your visit**, i.e., educational or scientific aspect. The visit **MUST** relate to the resources of the park and to the educational objectives of your organization. Include your educational objectives, lesson plans, course descriptions and daily activity schedule, as appropriate.
4. Name/title of official group contact: _____
(Name) (Title)
5. No. students: _____ No. adult sponsors: _____ (**Required: 1 adult per 10 students/ Preferred: 1 to 6**)
6. Signature of applicant: _____ Date: _____

FAX or mail application with attachments to:

Carlsbad Caverns National Park
Fee Collection Supervisor
3225 National Parks Highway
Carlsbad NM 88220
FAX 505/785-2302